

Community Gardens Application Form

Printing on both sides – total of 3 pages

Gardener Name #1: _____

Gardener Name #2: _____

Please check all that apply: Individual Membership ____ Family Membership ____
____ Resident ____ Non-Resident ____ Student ____ Senior

Mailing Address, City, Zip: _____

Home Phone: _____ Work Phone _____ Cell Phone _____

E-Mail Address #1: _____

E-Mail Address #2: _____

ANNUAL FEE INFORMATION (April to November)

Please make checks payable to: City of Germantown – Community Garden. Fees include water, large tools, wheelbarrows, mulch and opportunity for compost (at some future date).

FEE PAYMENT (Check the one that applies):

Germantown resident under 65	\$ 60 _____	
Germantown senior 65 & older	\$ 45 _____	
Germantown student 16 and older	\$ 35 _____	*(enrolled as a full-time student)
Germantown family (max 4)	\$ 100 _____	
All non-resident individuals	\$ 85 _____	
All non-resident families (max 4)	\$ 140 _____	
Other	\$ TBD _____	*(office staff will assist)

GARDENSHIP FUND DONATION

GARDENSHIP FUND DONATION ENCLOSED \$ _____ *(Tax deductible)

A donation to the GARDENSHIP FUND will help provide a garden membership at a reduced rate to those in need or be used for garden enhancement projects.

TOTAL AMOUNT ENCLOSED \$ _____

Staff Only

Received by: _____ Date: _____
Payment Method: Check #: _____ Visa/MC

IMPORTANT INFORMATION

The following is required to participate in the Community Gardens Program:

1. Please fill out this application
2. Please fill out and sign the Acknowledgment of Risk & Release form and volunteer form.
3. Fee must be received at the time of application.
4. Send application forms and fee to: **BL Farm Park Community Gardens Membership**
C/O City of Germantown Parks and Recreation Department
2276 West Street
Germantown, TN 38138

COMMUNITY SERVICE INFORMATION

There will be work requirements for all aspects of the garden operations and fundraising events. There will be flexibility when members choose to work. Members are required to contribute a minimum of two (2) hours of volunteer service per week – this first year may require more depending on the initial number of members. Additional hours of garden related community service may be requested by garden team as needed - during planting season, peak harvest times or special projects work days. Harvest days and food/flower distribution will be determined by the majority of the garden members at the beginning of the season. **Please check the areas you are interested in or can help in below.** We will try to match your requests; however you may or may not get called to help in the manner you checked below. It depends on the program's needs.

_____ **Garden co-leaders:** Primary contacts for the garden. Coordinate and facilitate all garden activities and meetings. Recruit gardeners for various jobs. Provide leadership and guidance for gardeners and volunteer positions below. Identify and recruit new garden co-leaders. Chair the garden's leadership team.

_____ **Zone/plot coordinators:** Organizes spring registration, makes zone/plot team assignments and garden map. Creates spreadsheet or other files for gardener contact information.

_____ **Grounds crew:** Maintains the garden's common areas. Mows grass, clears pathways and removes trash as needed within the garden boundaries of the farm park.

_____ **Maintenance crew:** Maintains tools, equipment, hoses and raised beds.

_____ **Supply crew:** Maintains supplies of common garden materials such as compost, mulch, tools and hoses.

_____ **Composting crew:** Maintains and oversees the composting and compost bins. Provides gardeners with clear composting instructions via signs, verbal communication, workshops, e-mails or memos.

_____ **Events crew:** Coordinates regular and special garden events including work parties, neighborhood parties and educational workshops.

_____ **Treasurer:** Collects contributions to the BL Farm Park Gardens Association, maintains garden accounts, writes checks.

_____ **Communications crew:** Revises and assembles the Gardener's Welcome Packet with leadership team. Writes and distributes garden newsletter or blog. Communicates with gardeners through e-mail, phone calls or mailings about garden news, meetings and events. Maintains garden bulletin board.

_____ **Outreach and community relations:** Maintains positive relations with neighbor associations, local citizen groups and schools. Ensures that is broad-based citizen involvement and support of the garden. Coordinates social events for gardeners and stakeholders with Parks and Recreation Department and/or BL Farm Park staff.

_____ **Horticulture advisers and "Master Gardeners":** Possess gardening experience and a willingness to share it with gardeners. Mentor new gardeners, circulate new gardening resources, and coordinate gardening workshops with the events crew.

_____ **Monitors:** Ensure that all plots are being used and maintained at acceptable levels according to the Gardener Guidelines. Contact gardeners who either appear to have dropped out or are not keeping their plots maintained. Communicate with the registrar about available plots.

_____ **Security:** Works to minimize theft, vandalism and other unwanted activities.

_____ **Translation:** Provides translation for gardeners, garden literature and signs. May also make arrangements for others to provide translation.

_____ **Leadership team:** Comprised of the garden co-leaders and at least three other gardeners. Responsible for reviewing, editing and enforcing all Gardener Guidelines and Charter and By-Laws of the BL Farm Park Garden Association.

Other helpful information you would like to share:

I own or have access to and willing to use for garden maintenance or projects (check all that apply):

- _____ Generator
- _____ Lawn Mower
- _____ Weed Eater
- _____ Chipper
- _____ Bobcat or similar machine
- _____ Rototiller
- _____ Other _____

I have these skills and/or expertise (check all that apply):

- _____ Carpentry
- _____ Equipment Operator (Bobcat, Skid Loader)

- _____ Graphic Arts, Illustrations
- _____ Videographer
- _____ Photography
- _____ Desktop Publishing
- _____ General Writing, Journalism
- _____ Accounting
- _____ Landscape Designer or Architect
- _____ MASTER GARDENER,
- _____ MASTER COMPOSTER
- _____ Teaching Children
- _____ Environmental Education
- _____ Agriculture/Farming
- _____ Local History

BL FARM PARK COMMUNITY GARDEN AGREEMENT

A directory of the community gardeners will be published this summer. The directory will contain names, phone numbers, e-mails and teams of the community gardeners, for use solely by other community gardeners. By signing this agreement, I hereby give permission to share my phone number with other community gardeners unless I have checked the following box:

_____ I do **not** want my phone number shared with other Community Gardeners. Please do not publish my phone number in the directory.

I have read and understood the enclosed rules and policies, and by signing this application agree to comply with them. I understand that failure to comply with the rules and policies will result in loss of gardening privileges without refund of any fees as determined by the City of Germantown Parks and Recreation Department and the BL Farm Park Community Garden Association.

Signed Date: _____

ADVISEMENT OF RISK, RELEASE AND MEDICAL AUTHORIZATION

Please read this form carefully and be aware that in registering for participation in this BL Farm Park Community Gardens Program you are advised of the risks which you may experience as a result of participating in this Program. The Community Gardens Program is an activity in which, despite preparation, instruction, medical advice, conditioning, and equipment, there is still a risk of injuries such as the following. This list is by no means complete or exclusive, but includes:

1. Muscle strain and other muscle injuries.
2. Foot problems.
3. Heat stroke or heat exhaustion

I release all claims which may arise against, and agree not to sue, the City of Germantown, the Parks and Recreation Department and the BL Farm Park Community Gardens Association and its officers, agents, employees and authorized volunteers, on my behalf as a result of participating in the Program. I further agree to indemnify, hold harmless and defend the City of Germantown, the Parks and Recreation Department and the BL Farm Park Community Gardens Association and its officers, agents, employees, and authorized volunteers from any and all claims by other parties resulting from injuries, damages, and losses caused by me arising out of, connected with, or in any way associated with the activities of the Program. In the event of any emergency, I authorize the City of Germantown, the Parks and Recreation Department and/or the BL Farm Park Community Gardens Association staff or volunteers to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my immediate care and agree that I will be responsible for payment of any and all medical services rendered. Photographs, digital images, or videotape of program participants and spectators may be used for future promotional or marketing material. I have read and fully understand the above. I understand this agreement shall not be modified orally.

Participant's Name _____ Date _____

Please print

Birth Date _____ Age _____ Sex: M _____ F _____

Participant's Signature _____

Address _____

Phone _____ Photo release (please initial) _____ Yes _____ No